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DI	ECLARAT	ION FO	R UTILITY OR	Attorney Docket Number	IDT-1654			
		DESIG	iN	First Named Inventor	Michael J. Miller			
	PATEN	IT APPI	LICATION	COMPLETE IF KNOWN				
	(3	7 CFR	1.63)	Application Number	09/884,797			
	Declaration Submitted with Initial Filing		Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)	Filing Date	06/18/2001			
		OR		Group Art Unit	2151			
	y			Examiner Name	unknown			

As a below named Inventor, I hereby declare that:										
My residence, mailing address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
"Content Addressable Memory Array Having Flexible Priority Support"										
<u> </u>			(Title of the Ir	vention)						
the specification of which is attached hereto OR										
was filed on (MM/	DD/YYYY)	06	6/18/2001	as United	States Applica	ation Number or F	CT International			
Application Number 09/884	,797 and was	amended	d on (MM/DD/YYYY) [(if app	olicable).					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.										
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent, inventor's or plant breeders rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application Number(s)	F	oreign Filing Date (MM/DD/YYYY)	Priority Not Claimed		Certified Co	py Attached? NO				
N/A	Country		(11111111111111111111111111111111111111			П	П			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:										
I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.										
Application Numbe		Filing Date (MM/DD/	(1111)	numb suppl	ional provisional a pers are listed on a emental priority d SB/02B attached	ata sheet				

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not

designated in the particle of the lacknowledge the between the filing d	duty to d	disclose information	on which is n	naterial to p	atentability	as define	ed in 37 CF	R 1.56 which	became available		
U.S. Parent Application or PCT Parent Number						arent Fil (MM/DD	ing Date /YYYY)		Parent Patent Number (if applicable)		
N/A	····										
Additional U.S.	or PCT i	nternational applica	ation numbers	are listed on	a supplem	ental priori	ity data shee	et PTO/SB/028	attached hereto.		
As a named invento	As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the										
Patent and Tradema					27158			Place Customer Number Bar			
	OR	Registered pra	ctitioner(s) na	me/registration	on number	listed below	w		Code Label here		
N	ame		Registra Numb		Name			Registration Number			
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☐ Additional regist	tered pra	ctitioner(s) named	on supplemer	ntal Registere	ed Practition	ner Informa	ation sheet F	PTO/SB/02C at	tached hereto.		
Direct all correspondence to: ☐ Customer Number or Bar Code Label OR ☐ Correspondence address below											
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
Name of Sole or First Inventor: A petition has been filed for this unsigned inventor											
Given Name (first and middle (if any) Family Name or Surname								е			
Michael J. Miller											
Inventor's Signature			druffe			<u> </u>		Date	6/13/01		
Residence: City Saratoga		Saratoga	State	CA	Cour	ntry	us	Citizensh	ip US		
Mailing Address		14101 Doulas I	Lane								
City		Saratoga	State	CA	ZIP		95070	Country	us		
☑ Additional inve	entors a	e being named or	n the 1 supple	emental Add	litional Inve	entor(s) st	neet(s) PTC	SB/02A attac	ched hereto:		

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page _1 of _1

Name of Additional	A petition has been filed for this unsigned inventor									
Given Name	(first and middle (if		Family Name or Surname							
-	Mark		Baumann							
Inventor's Signature	Hoch w	eonn				Date	29.	June 0/		
Residence: City	Campbell	State	CA		Country US		Citizenshi	p	US	
Mailing Address	1252 Cobblestone Drive									
City	Campbell	CA		ZIP	95008	Country		US		
Name of Additional	Joint Inventor,	if any:	A petition has been filed for this unsigned inventor							
Given Name	(first and middle (if	any)		Family Name or Surname						
Inventor's Signature			· · · · · · · · · · · · · · · · · · ·	•			Date			
City		State			Country US		Citizenshi	P		
Mailing Address										
City		State			ZIP		Country		US	
Name of Additional	Joint Inventor,	if any:	A petition has been filed for this unsigned inventor							
Given Name	Family Name or Surname									
Inventor's Signature					Date					
City		State			Country	US	Citizenshi	р		
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